

Vonda Wallace
PCT International Division

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-876)								SERIAL NO.	FILING DATE		
								APPLICANT(S)		09/341817	
								CLAIMS			
AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT							
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.		
1	/							51			
2	/							52			
3	/							53			
4	/							54			
5	/							55			
6	/							56			
7	/							57			
8	/							58			
9	/							59			
10	/							60			
11	/							61			
12	/							62	1		
13	/							63			
14	/							64			
15								65			
16								66			
17								67			
18								68			
19								69			
20								70			
21								71			
22								72	1		
23								73			
24								74			
25								75			
26								76			
27								77			
28								78	1		
29								79			
30								80			
31								81			
32								82			
33								83			
34								84			
35								85			
36								86			
37								87			
38								88			
39								89			
40								90			
41								91			
42								92			
43								93			
44								94			
45								95			
46								96			
47								97			
48								98			
49								99			
50								100			
TOTAL IND.								TOTAL IND.			
TOTAL DEP.								TOTAL DEP.			
TOTAL CLAIMS								TOTAL CLAIMS			